AMENDMENTS TO THE CLAIMS

1. (CURRENTLY AMENDED) A method of treating bacterial or protozoal infection comprising the adjunctive administration to a mammalian subject in need of such treatment of a pharmaceutically effective amount of a macrolide antibiotic at a dosage of between about 0.2 mg/kg/day and about 200 mg/kg/day and a pharmaceutically effective amount of a Substance P antagonist at a dosage of between about 2 mg/kg/day and about 7 mg/kg/day; wherein said Substance P antagonist is selected from the group consisting of (2S,3S)-3-(2-isopropoxy-5-trifluoromethoxybenzyl)amino-2-phenylpiperidine; (2S,3S)-3-(2-ethoxy-5-trifluoromethoxybenzyl)amino-2-phenylpiperidine; (2S,3S)-3-(2-methoxy-5-trifluoromethoxybenzyl)amino-2-phenylpiperidine; (2S,3S)-3-(5-tert-butyl-2-trifluoromethoxybenzyl)amino-2-phenylpiperidine; (2S,3S)-3-(2-difluoromethoxy-5-trifluoromethoxybenzyl)amino-2-phenylpiperidine; and pharmaceutically acceptable salts and solvates thereof.

2. (ORIGINAL) The method of claim 1 wherein the subject is a companion animal or human.

3. (ORIGINAL) The method of claim 1 wherein the macrolide antibiotic is selected from the group consisting of erythromycin, clarithromycin, azithromycin, josamycin, and tylosin.

4. (CANCELED)

5. (CURRENTLY AMENDED) The method of claim 4 1 wherein the Substance P antagonist is (2S,3S)-3-(2-methoxy-5-trifluoromethoxybenzyl)amino-2-phenylpiperidine, or a pharmaceutically acceptable salt or solvate thereof.

6. (CURRENTLY AMENDED) A method of preventing or treating emesis associated with a macrolide antibiotic comprising administering to a subject in need of such prevention or treatment a pharmaceutically effective amount of a Substance P antagonist at a dosage of between about 2 mg/kg/day and about 7 mg/kg/day; wherein said Substance P antagonist is selected from the group consisting of (2S,3S)-3-(2-isopropoxy-5-trifluoromethoxybenzyl)amino-2-phenylpiperidine;

(2S,3S)-3-(2-ethoxy-5-trifluoromethoxybenzyl)amino-2-phenylpiperidine;
(2S,3S)-3-(2-methoxy-5-trifluoromethoxybenzyl)amino-2-phenylpiperidine;
(2S,3S)-3-(5-tert-butyl-2-trifluoromethoxybenzyl)amino-2-phenylpiperidine;
(2S,3S)-3-(2-difluoromethoxy-5-trifluoromethoxybenzyl)amino-2-phenylpiperidine;
and pharmaceutically acceptable salts and solvates thereof.

7. (ORIGINAL) The method of claim 6 wherein the subject is a companion animal.

8. (ORIGINAL) The method of claim 6 wherein the subject is a human.

9. (CANCELD)

10. (CURRENTLY AMENDED) The method of claim ~~9~~ 6 wherein the Substance P antagonist is (2S,3S)-3-(2-methoxy-5-trifluoromethoxybenzyl)amino-2-phenylpiperidine, or a pharmaceutically acceptable salt or solvate thereof.

11. (CURRENTLY AMENDED) A pharmaceutical composition comprising a pharmaceutically effective amount of a macrolide antibiotic, a pharmaceutically effective amount of a Substance P antagonist, and optionally, a carrier; wherein the weight ratio of said Substance P antagonist and said macrolide antibiotic is between about 35:1 and about 1:1000; wherein said Substance P antagonist is selected from the group consisting of
(2S,3S)-3-(2-isopropoxy-5-trifluoromethoxybenzyl)amino-2-phenylpiperidine;
(2S,3S)-3-(2-ethoxy-5-trifluoromethoxybenzyl)amino-2-phenylpiperidine;
(2S,3S)-3-(2-methoxy-5-trifluoromethoxybenzyl)amino-2-phenylpiperidine;
(2S,3S)-3-(5-tert-butyl-2-trifluoromethoxybenzyl)amino-2-phenylpiperidine;
(2S,3S)-3-(2-difluoromethoxy-5-trifluoromethoxybenzyl)amino-2-phenylpiperidine;
and pharmaceutically acceptable salts and solvates thereof.

12. (ORIGINAL) The pharmaceutical composition of claim 11 wherein the carrier is an excipient.

13. (ORIGINAL) The pharmaceutical composition of claim 11 wherein the macrolide antibiotic is selected from the group consisting of erythromycin, clarithromycin,

azithromycin, josamycin, and tylosin; and the Substance P antagonist is (2S,3S)-3-(2-methoxy-5-trifluoromethoxybenzyl)amino-2-phenylpiperidine, or a pharmaceutically acceptable salt or solvate thereof.

14. (ORIGINAL) The pharmaceutical composition of claim 11 wherein said pharmaceutical composition is suitable for oral, rectal, parenteral, transdermal, buccal, nasal, sublingual, or subcutaneous administration.

15. (CANCELED)